PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

whh	lical	ЮП	Ot	Docket	Num	bei

09/288475

CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL ENTITY OTHER THA					
F(DR			ER FILED		NUMBER		1			OR T		
_			FAULRA	THE PARTY OF					RATE	FEE	-	RATE	FEE
BA	ASIC FEE		100							380.00	OR		760.00
TC	OTAL CLAIMS		19	minus	20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 5 minus 3 = * 2							X39=		OR	X78=	156		
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2							, I	TOTAL		OR	TOTAL	916	
CLAIMS AS AMENDED - PART II							,		_	OTHER	THAN		
		(Col	umn 1)		(Co	olumn 2)	(Column 3)	. <u></u>	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		REM AF	AIMS AINING TER IDMENT		N PRI	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	* /	<u> </u>	Minus	** 0	20	=		X\$ 9=		OR	X\$18=	
AME	Independent	* I	<u> </u>	Minus	***	3	= 2		X39=		OR.	2X78=	156-00
	FIRST PRESE	NIAIIC	IN OF MI	ULTIPLE DEF	'ENDE	ENT CLAIM			+130=		OR	+260=	
							_	TOTAL			TOTAL		
		(Coli	ımn 1)		(Cr	olumn 2)	(Column 3)	А	DDIT. FEE			ADDIT. FEE	
ENT B		CL REM.	AIMS AINING TER IDMENT		HI NI PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	ş	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	21	Minus	**	20	=		X\$ 9=		OR	X\$18=	18
AME	Ind pendent	*	[]	Minus	***	5	=	-	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							T	+130=		OR	+260=		
	BEI	Α۱	VAIL	ABLE (PY			TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	18
		_(Colu	umn 1)		(Cc	olumn 2)	(Column 3)	73	JUIT. 1 LL .			ADDII. 1 C.2.	
AMENDMENT C		REM. AF	AIMS AINING TER IDMENT		NI PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S N	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
A	Independent	*	N 05 M	Minus	***	-117 01 1111	<u> </u>		X39=		OR	X78=	
	FIRST PRESE	NIAIIO	N OF MU	JLTIPLE DEF	ENDE	ENT CLAIM			+130=			+260=	
	* If th entry in column 1 is less than the entry in column 2, write "0" in column 3.							L	TOTAL		OR	TOTAL	
***	** If th "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 3, enter "3." Th "High st Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/288475

FORM OIPE-RAM-01 (Rev. 12/97)

Total Fee Calculation

			04.04.2	LLIOI				
	Fee Code	Total . # Claims	Number Extra	x	Fee	Fee	=	Total
	Sm/Lg.				Sm. Entity	Lg. Entity		Total
Basic Filing Fee	201/101					760	· =	760
Total Claims >20	203/103	-20=		X			=	1,80
Independent Claims >3	202/102		2	X		78	=	156
Mult. Dep Claim Present	204/104						_	
Surcharge	205/105						=	130
English Translation	139	•						12
TOTAL FEE CALCULA	ATTION .							1046
Fees due upon filing t	he application:							
Total Filing Fees Due		104	6.00	_				
Less Filing Fees Subm	vitted - \$		0		j			
BALANCE DUE	= \$	1046	2,00					
Office of Initial Patent	Examination		<u>-</u>					